

Kristina Lawson, JD, Chair
Panel B

1 XAVIER BECERRA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 LEANNA E. SHIELDS
Deputy Attorney General
4 State Bar No. 239872
600 West Broadway, Suite 1800
5 San Diego, CA 92101
P.O. Box 85266
6 San Diego, CA 92186-5266
Telephone: (619) 738-9401
7 Facsimile: (619) 645-2061

8 *Attorneys for Complainant*

10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

Case No. 8002016019964

14 **SU-YONG PAK M.D.**
15 **5451 E. La Palma Avenue, Suite 14**
La Palma, CA 90623

OAH No. 2018060159

16 **Physician's and Surgeon's Certificate**
17 **No. A 34079,**

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

18 Respondent.

19
20 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
21 entitled proceedings that the following matters are true:

22 **PARTIES**

23 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
24 of California (Board). She brought this action solely in her official capacity and is represented in
25 this matter by Xavier Becerra, Attorney General of the State of California, by LeAnna E. Shields,
26 Deputy Attorney General.

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2. Respondent Su-Yong Pak M.D. (Respondent) is represented in this proceeding by attorney Carlos Ramirez, Esq., whose address is: 8939 S. Sepulveda Blvd., Suite 110 #701, Los Angeles, CA 90045.

3. On or about July 2, 1979, the Board issued Physician's and Surgeon's Certificate No. A 34079 to Respondent. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 8002016019964, and will expire on August 31, 2020, unless renewed.

JURISDICTION

4. On or about April 24, 2018, Accusation No. 8002016019964 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on April 24, 2018. Respondent timely filed his Notice of Defense contesting the Accusation. A true and correct copy of Accusation No. 8002016019964 is attached as Exhibit A and incorporated by reference as if fully set forth herein.

ADVISEMENT AND WAIVERS

5. Respondent has carefully read, fully discussed with counsel, and fully understands the charges and allegations in Accusation No. 8002016019964. Respondent has also carefully read, fully discussed with counsel, and fully understands the effects of this Stipulated Settlement and Disciplinary Order.

6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

7. Having the benefit of counsel, Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

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1 its/his/her review, discussion and/or consideration of this Stipulated Settlement and Disciplinary
2 Order or of any matter or matters related hereto.

3 **ADDITIONAL PROVISIONS**

4 12. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to
5 be an integrated writing representing the complete, final and exclusive embodiment of the
6 agreements of the parties in the above-entitled matter.

7 13. The parties agree that copies of this Stipulated Settlement and Disciplinary Order,
8 including copies of the signatures of the parties, may be used in lieu of original documents and
9 signatures and, further, that such copies shall have the same force and effect as originals.

10 14. Respondent agrees that his Physician's and Surgeon's Certificate No. A 34079 is
11 subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth
12 in the Disciplinary Order below.

13 **DISCIPLINARY ORDER**

14 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 34079 issued
15 to Respondent Su-Yong Pak M.D. is hereby revoked. However, the revocation is stayed and
16 Respondent is placed on probation for thirty-five (35) months on the following terms and
17 conditions.

18 1. **EDUCATION COURSE.** Within 60 calendar days of the effective date of this
19 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
20 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours
21 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
22 correcting any areas of deficient practice or knowledge and shall be Category I certified. The
23 educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to
24 the Continuing Medical Education (CME) requirements for renewal of licensure. Following the
25 completion of each course, the Board or its designee may administer an examination to test
26 Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65
27 hours of CME of which 40 hours were in satisfaction of this condition.

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1 2. **MEDICAL RECORD KEEPING COURSE.** Within 60 calendar days of the
2 effective date of this Decision, Respondent shall enroll in a course in medical record keeping
3 approved in advance by the Board or its designee. Respondent shall provide the approved course
4 provider with any information and documents that the approved course provider may deem
5 pertinent. Respondent shall participate in and successfully complete the classroom component of
6 the course not later than six (6) months after Respondent's initial enrollment. Respondent shall
7 successfully complete any other component of the course within one (1) year of enrollment. The
8 medical record keeping course shall be at Respondent's expense and shall be in addition to the
9 Continuing Medical Education (CME) requirements for renewal of licensure.

10 A medical record keeping course taken after the acts that gave rise to the charges in the
11 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
12 or its designee, be accepted towards the fulfillment of this condition if the course would have
13 been approved by the Board or its designee had the course been taken after the effective date of
14 this Decision.

15 Respondent shall submit a certification of successful completion to the Board or its
16 designee not later than 15 calendar days after successfully completing the course, or not later than
17 15 calendar days after the effective date of the Decision, whichever is later.

18 3. **CLINICAL COMPETENCE ASSESSMENT PROGRAM.** Within 60 calendar
19 days of the effective date of this Decision, Respondent shall enroll in a clinical competence
20 assessment program approved in advance by the Board or its designee. Respondent shall
21 successfully complete the program not later than six (6) months after Respondent's initial
22 enrollment unless the Board or its designee agrees in writing to an extension of that time.

23 The program shall consist of a comprehensive assessment of Respondent's physical and
24 mental health and the six general domains of clinical competence as defined by the Accreditation
25 Council on Graduate Medical Education and American Board of Medical Specialties pertaining to
26 Respondent's current or intended area of practice. The program shall take into account data
27 obtained from the pre-assessment, self-report forms and interview, and the Decision(s),
28 Accusation(s), and any other information that the Board or its designee deems relevant. The

1 program shall require Respondent's on-site participation for a minimum of three (3) and no more
2 than five (5) days as determined by the program for the assessment and clinical education
3 evaluation. Respondent shall pay all expenses associated with the clinical competence
4 assessment program.

5 At the end of the evaluation, the program will submit a report to the Board or its designee
6 which unequivocally states whether the Respondent has demonstrated the ability to practice
7 safely and independently. Based on Respondent's performance on the clinical competence
8 assessment, the program will advise the Board or its designee of its recommendation(s) for the
9 scope and length of any additional educational or clinical training, evaluation or treatment for any
10 medical condition or psychological condition, or anything else affecting Respondent's practice of
11 medicine. Respondent shall comply with the program's recommendations.

12 Determination as to whether Respondent successfully completed the clinical competence
13 assessment program is solely within the program's jurisdiction.

14 4. **PROHIBITED PRACTICE.** During probation, Respondent is prohibited from
15 performing endoscopies and colonoscopies, except in a hospital setting. After the effective date
16 of this Decision, all patients being treated by the Respondent shall be notified that the Respondent
17 is prohibited from performing endoscopies and colonoscopies, except in a hospital setting. Any
18 new patients must be provided this notification at the time of their initial appointment.

19 Respondent shall maintain a log of all patients to whom the required oral notification was
20 made. The log shall contain the: 1) patient's name, address and phone number; 2) patient's
21 medical record number, if available; 3) the full name of the person making the notification; 4) the
22 date the notification was made; and 5) a description of the notification given. Respondent shall
23 keep this log in a separate file or ledger, in chronological order, shall make the log available for
24 immediate inspection and copying on the premises at all times during business hours by the Board
25 or its designee, and shall retain the log for the entire term of probation.

26 5. **NOTIFICATION.** Within seven (7) days of the effective date of this Decision, the
27 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
28 Chief Executive Officer at every hospital where privileges or membership are extended to

Respondent, at any other facility where Respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15 calendar days. This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

6. **SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE NURSES**. During probation, Respondent is prohibited from supervising physician assistants and advanced practice nurses.

7. **OBEY ALL LAWS**. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.

8. **QUARTERLY DECLARATIONS**. Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

9. **GENERAL PROBATION REQUIREMENTS**.

Compliance with Probation Unit

Respondent shall comply with the Board's probation unit.

Address Changes

Respondent shall, at all times, keep the Board informed of Respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

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1 Place of Practice

2 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
3 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
4 facility.

5 License Renewal

6 Respondent shall maintain a current and renewed California physician's and surgeon's
7 license.

8 Travel or Residence Outside California

9 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
10 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
11 (30) calendar days.

12 In the event Respondent should leave the State of California to reside or to practice,
13 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
14 departure and return.

15 10. **INTERVIEW WITH THE BOARD OR ITS DESIGNEE.** Respondent shall be
16 available in person upon request for interviews either at Respondent's place of business or at the
17 probation unit office, with or without prior notice throughout the term of probation.

18 11. **NON-PRACTICE WHILE ON PROBATION.** Respondent shall notify the Board
19 or its designee in writing within 15 calendar days of any periods of non-practice lasting more than
20 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
21 defined as any period of time Respondent is not practicing medicine as defined in Business and
22 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
23 patient care, clinical activity or teaching, or other activity as approved by the Board. If
24 Respondent resides in California and is considered to be in non-practice, Respondent shall
25 comply with all terms and conditions of probation. All time spent in an intensive training
26 program which has been approved by the Board or its designee shall not be considered non-
27 practice and does not relieve Respondent from complying with all the terms and conditions of
28 probation. Practicing medicine in another state of the United States or Federal jurisdiction while

1 on probation with the medical licensing authority of that state or jurisdiction shall not be
2 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
3 period of non-practice.

4 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
5 months, Respondent shall successfully complete the Federation of State Medical Board's Special
6 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
7 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
8 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

9 Respondent's period of non-practice while on probation shall not exceed two (2) years.

10 Periods of non-practice will not apply to the reduction of the probationary term.

11 Periods of non-practice for a Respondent residing outside of California will relieve
12 Respondent of the responsibility to comply with the probationary terms and conditions with the
13 exception of this condition and the following terms and conditions of probation: Obey All Laws;
14 General Probation Requirements; Quarterly Declarations.

15 12. **COMPLETION OF PROBATION.** Respondent shall comply with all financial
16 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
17 completion of probation. Upon successful completion of probation, Respondent's certificate shall
18 be fully restored.

19 13. **VIOLATION OF PROBATION.** Failure to fully comply with any term or
20 condition of probation is a violation of probation. If Respondent violates probation in any
21 respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke
22 probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to
23 Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation,
24 the Board shall have continuing jurisdiction until the matter is final, and the period of probation
25 shall be extended until the matter is final.

26 14. **LICENSE SURRENDER.** Following the effective date of this Decision, if
27 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
28 the terms and conditions of probation, Respondent may request to surrender his or her license.

1 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
2 determining whether or not to grant the request, or to take any other action deemed appropriate
3 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
4 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
5 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
6 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
7 application shall be treated as a petition for reinstatement of a revoked certificate.

8 15. **PROBATION MONITORING COSTS.** Respondent shall pay the costs associated
9 with probation monitoring each and every year of probation, as designated by the Board, which
10 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
11 California and delivered to the Board or its designee no later than January 31 of each calendar
12 year.

13 **ACCEPTANCE**

14 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
15 discussed it with my attorney, Carlos Ramirez, Esq. I fully understand the stipulation and the
16 effect it will have on my Physician's and Surgeon's Certificate No. A 34079. I enter into this
17 Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree
18 to be bound by the Decision and Order of the Medical Board of California.

19
20 DATED: 12/13/18



SU-YONG PAK M.D.
Respondent

21
22 I have read and fully discussed with Respondent Su-Yong Pak M.D. the terms and
23 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
24 I approve its form and content.

25
26 DATED: 12/13/18



CARLOS RAMIREZ
Attorney for Respondent

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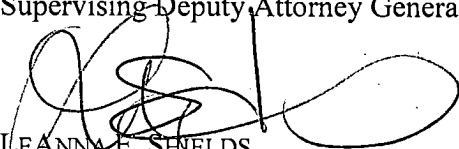
ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated: 12.14.18

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
MATTHEW M. DAVIS
Supervising Deputy Attorney General



LEANNA E. SHIELDS
Deputy Attorney General
Attorneys for Complainant

SD2018700279
13366987

Exhibit A

Accusation No. 8002016019964

1 XAVIER BECERRA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 LEANNA E. SHIELDS
Deputy Attorney General
4 State Bar No. 239872
600 West Broadway, Suite 1800
5 San Diego, CA 92101
P.O. Box 85266
6 San Diego, CA 92186-5266
Telephone: (619) 738-9401
7 Facsimile: (619) 645-2061

8 *Attorneys for Complainant*

10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

Case No. 8002016019964

14 **SU-YONG PAK, M.D.**
15 **5451 E. La Palma Avenue, Suite 14**
La Palma, CA 90623

ACCUSATION

16 **Physician's and Surgeon's Certificate**
17 **No. A 34079,**

18 Respondent.

19
20 Complainant alleges:

21 **PARTIES**

22 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
23 capacity as the Executive Director of the Medical Board of California, Department of Consumer
24 Affairs (Board).

25 2. On or about July 2, 1979, the Medical Board issued Physician's and Surgeon's
26 Certificate No. A 34079 to Su-Yong Pak M.D. (Respondent). The Physician's and Surgeon's
27 Certificate was in full force and effect at all times relevant to the charges brought herein and will
28 expire on August 31, 2018, unless renewed.

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1 5. Section 2234 of the Code states, in pertinent part:

2 “The board shall take action against any licensee who is charged with
3 unprofessional conduct. In addition to other provisions of this article, unprofessional
4 conduct includes, but is not limited to, the following:

5 “(a) Violating or attempting to violate, directly or indirectly, assisting in or
6 abetting the violation of, or conspiring to violate any provision of this chapter.

7 “(b) Gross negligence.

8 “(c) Repeated negligent acts. To be repeated, there must be two or more
9 negligent acts or omissions. An initial negligent act or omission followed by a
10 separate and distinct departure from the applicable standard of care shall constitute
11 repeated negligent acts.

12 “(1) An initial negligent diagnosis followed by an act or omission medically
13 appropriate for that negligent diagnosis of the patient shall constitute a single
14 negligent act.

15 “(2) When the standard of care requires a change in the diagnosis, act, or
16 omission that constitutes the negligent act described in paragraph (1), including, but
17 not limited to, a reevaluation of the diagnosis or a change in treatment, and the
18 licensee’s conduct departs from the applicable standard of care, each departure
19 constitutes a separate and distinct breach of the standard of care.

20 “...”

21 6. Section 2266 of the Code states:

22 “The failure of a physician and surgeon to maintain adequate and accurate
23 records relating to the provision of services to their patients constitutes unprofessional
24 conduct.”

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1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Gross Negligence)**

3 7. Respondent has subjected his Physician's and Surgeon's Certificate No. A 34079 to
4 disciplinary action under sections 2227 and 2234, as defined by 2234, subdivision (b), of the
5 Code, in that he committed gross negligence in his care and treatment of Patients A, B, and C,¹ as
6 more particularly alleged hereinafter.

7 **Patient A**

8 8. On or about April 25, 2011, Patient A presented for an endoscopy procedure. Prior to
9 the procedure, Respondent administered Versed² to Patient A, the amount administered is not
10 clearly documented. Respondent was only assisted by a medical assistant during the procedure.
11 There is no documentation to indicate the medical assistant was properly trained in the
12 administration of intravenous sedation, is licensed as a registered nurse or certified in Advanced
13 Cardiovascular Life Support. Further, there is no clear or comprehensive documentation of the
14 results of the procedure.

15 9. On or about July 2, 2013, Patient A presented for an endoscopy procedure. Prior to
16 the procedure, Respondent administered Versed to Patient A, the amount administered is not
17 clearly documented. Respondent was only assisted by a medical assistant during the procedure.
18 There is no documentation to indicate the medical assistant was properly trained in the
19 administration of intravenous sedation, is licensed as a registered nurse or certified in Advanced
20 Cardiovascular Life Support. Further, there is no clear or comprehensive documentation of the
21 results of the procedure.

22 10. On or about November 3, 2014, Patient A presented for an endoscopy procedure.
23 Prior to the procedure, Respondent administered Versed to Patient A, the amount administered is
24 not clearly documented. Respondent was only assisted by a medical assistant during the

25
26 ¹ For patient privacy purposes, patient identities are withheld.

27 ² Versed is a brand name for midazolam, a Schedule IV controlled substance pursuant to Health
28 and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and
Professions Code section 4022. It is commonly used to cause relaxation prior to a surgical procedure.

1 procedure. There is no documentation to indicate the medical assistant was properly trained in
2 the administration of intravenous sedation, is licensed as a registered nurse or certified in
3 Advanced Cardiovascular Life Support. Further, there is no clear or comprehensive
4 documentation of the results of the procedure.

5 11. On or about March 10, 2017, Patient A presented for an endoscopy and colonoscopy
6 procedure. Prior to the procedure, Respondent administered Versed to Patient A, the amount
7 administered is not clearly documented. Respondent was only assisted by a medical assistant
8 during the procedure. There is no documentation to indicate the medical assistant was properly
9 trained in the administration of intravenous sedation, is licensed as a registered nurse or certified
10 in Advanced Cardiovascular Life Support. Further, there is no clear or comprehensive
11 documentation of the results of the procedure.

12 **Patient B**

13 12. On or about November 2, 2012, Patient B presented for an endoscopy procedure.
14 Prior to the procedure, Respondent administered Versed to Patient B, the amount administered is
15 not clearly documented. Respondent was only assisted by a medical assistant during the
16 procedure. There is no documentation to indicate the medical assistant was properly trained in
17 the administration of intravenous sedation, is licensed as a registered nurse or certified in
18 Advanced Cardiovascular Life Support. Further, there is no clear or comprehensive
19 documentation of the results of the procedure.

20 **Patient C**

21 13. On or about April 9, 2013, Patient C presented for an endoscopy procedure. Prior to
22 the procedure, Respondent administered Versed to Patient C, the amount administered is not
23 clearly documented. Respondent was only assisted by a medical assistant during the procedure.
24 There is no documentation to indicate the medical assistant was properly trained in the
25 administration of intravenous sedation, is licensed as a registered nurse or certified in Advanced
26 Cardiovascular Life Support. Further, there is no clear or comprehensive documentation of the
27 results of the procedure.

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1 14. Respondent committed gross negligence which included, but was not limited to:

2 A. Paragraphs 8 through 13, above, are hereby incorporated by reference
3 and realleged as if fully set forth herein;

4 B. Respondent failed to use proper safety elements in the administration
5 of sedation medications during the endoscopy performed on Patient A
6 on April 25, 2011;

7 C. Respondent failed to use proper safety elements in the administration
8 of sedation medications during the endoscopy performed on Patient A
9 on July 2, 2013;

10 D. Respondent failed to use proper safety elements in the administration
11 of sedation medications during the endoscopy performed on Patient A
12 on November 3, 2014;

13 E. Respondent failed to use proper safety elements in the administration
14 of sedation medications during the endoscopy performed on Patient A
15 on March 10, 2017;

16 F. Respondent failed to use proper safety elements in the administration
17 of sedation medications during the colonoscopy performed on Patient
18 A on March 10, 2017;

19 G. Respondent failed to use proper safety elements in the administration
20 of sedation medications during the endoscopy performed on Patient B
21 on November 2, 2012; and

22 H. Respondent failed to use proper safety elements in the administration
23 of sedation medications during the endoscopy performed on Patient C
24 on April 9, 2013.

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1 **THIRD CAUSE FOR DISCIPLINE**

2 **(Inadequate or Inaccurate Record Keeping)**

3 17. Respondent has further subjected his Physician's and Surgeon's Certificate No. A
4 34079 to disciplinary action under sections 2227 and 2234, as defined by 2266, of the Code, in
5 that he failed to maintain adequate or accurate records in his care and treatment of Patients A, B,
6 and C, as more particularly alleged in paragraphs 8 through 16, above, which are hereby
7 incorporated by reference and realleged as if fully set forth herein.

8 **FOURTH CAUSE FOR DISCIPLINE**

9 **(Violation of a Provision or Provisions of the Medical Practice Act)**

10 18. Respondent has further subjected his Physician's and Surgeon's Certificate No. A
11 34079 to disciplinary action under sections 2227 and 2234, as defined by 2234, subdivision (a), of
12 the Code, in that he violated a provision or provisions of the Medical Practice Act in his care and
13 treatment of Patients A, B, and C, as more particularly alleged in paragraphs 8 through 17, above,
14 which are hereby incorporated by reference and realleged as if fully set forth herein.

15 **DISCIPLINARY CONSIDERATIONS**

16 19. To determine the degree of discipline, if any, to be imposed on Respondent Su-Yong
17 Pak M.D., Complainant alleges that on or about April 20, 2016, in a prior disciplinary action
18 entitled *In the Matter of the First Amended Accusation Against Su-Yong Pak M.D.* before the
19 Medical Board of California, Case No. 04-2011-219511, Respondent's license was placed on two
20 (2) years' probation for repeated negligent acts. That decision is now final and is incorporated by
21 reference as if fully set forth herein.

22 **PRAYER**

23 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
24 and that following the hearing, the Medical Board of California issue a decision:

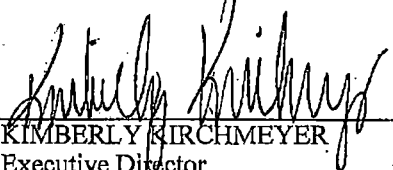
25 1. Revoking or suspending Physician's and Surgeon's Certificate No. A 34079, issued
26 to Respondent Su-Yong Pak M.D.;

27 2. Revoking, suspending or denying approval of Respondent Su-Yong Pak M.D.'s
28 authority to supervise physician assistants and advanced practice nurses;

1 3. Ordering Respondent Su-Yong Pak M.D., if placed on probation, to pay the Board the
2 costs of probation monitoring; and

3 4. Taking such other and further action as deemed necessary and proper.
4

5 DATED: April 24, 2018


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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